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FILING DATE 14445 3348 03/28/2001 09/819,351 Katsumi Watanabe TITLE OF INVENTION: PROGRAM DEVELOPMENT SUPPORT APPARATUS **SMALL ENTITY** ISSUE FEE **PUBLICATION FEE TOTAL FEE(S) DUE** DATE DUE APPLN, TYPE 05/08/2006 \$1700 NO \$300 nonprovisional \$1400 **EXAMINER** ART UNIT **CLASS-SUBCLASS** 717-128000 STEELMAN, MARY J 2191 SCULLY, SCOTT, 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list MURPHY & PRESSER, (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, P.C. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) 00000039 09819351 (A) NAME OF ASSIGNEE Japan 01 FC: 1501 1400.00 OP NEC Electronics Corporation Kanagawa, 02 FC:1504 300.00 OP 03 FC:8001 3.00 OP ☐ Individual ☐ Corporation or other private group entity Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Kissue Fee Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. 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